

PTO/SB/17 (07-05)
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CENTRAL FAX CENTER

Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).

FEE TRANSMITTAL for FY 2007

Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT (\$ 460.00)

Complete if Known	
Application Number	09/936,479
Filing Date	09/13/2001
First Named Inventor	Siegfried Schwedler, et al.
Examiner Name	Zhuo H. Li
Art Unit	2185
Attorney Docket No.	PD990014 US

DEC 17 2007

METHOD OF PAYMENT (check all that apply) CUSTOMER NUMBER 24498

<input type="checkbox"/> Check	<input type="checkbox"/> Credit Card	<input type="checkbox"/> Money Order	<input type="checkbox"/> None	<input type="checkbox"/> Other (please identify): _____
<input checked="" type="checkbox"/> Deposit Account Deposit Account Number: 07-0832				Deposit Account Name: THOMSON LICENSING LLC
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)				
<input checked="" type="checkbox"/> Charge fee(s) indicated below		<input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee		
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Under 37 CFR 1.16 and 1.17
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FEE CALCULATION

1. BASIC FILING, SEARCH, AND EXAMINATION FEES

Application Type	FILING FEES		SEARCH FEES		EXAMINATION FEES	
	Fee (\$)	Small Entity	Fee (\$)	Small Entity	Fee (\$)	Small Entity
Utility	300	150	500	250	200	100
Design	200	100	100	50	130	65
Plant	200	100	300	150	160	80
Reissue	300	150	500	250	600	300
Provisional	200	100	0	0	0	0

2. EXCESS CLAIM FEES

Fee Description

Each claim over 20 (including Reissues)

Each independent claim over 3 (including Reissues)

Multiple dependent claims

Total Claims	Extra Claims	Fee (\$)	Fee Paid (\$)	Small Entity	Fee (\$)	Fee (\$)
-20 or HP=	x	=		50	25	
				200	100	
				360	180	

Indep. Claims **Extra Claims** **Fee (\$)** **Fee Paid (\$)** **Multiple Dependent Claims** **Fee (\$)** **Fee Paid (\$)**

-3 or HP= x =

HP = highest number of total claims paid for, if greater than 20.

Total Sheets **Extra Sheets** **Number of each additional 50 or fraction thereof** **Fee (\$)** **Fee Paid (\$)**

-100 = / 50 = (round up to a whole number) x = **Fees Paid (\$)**

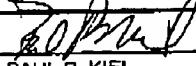
4. OTHER FEE(\$)

Non-English Specification, \$130 fee (no small entity discount)

Other (e.g., late filing surcharge): Petition for Extension of Time - 2 months (37 CFR 1.17(a)(2))

\$460.00

SUBMITTED BY

Signature		Registration No. (Attorney/Agent)	40,677	Telephone	609-734-6815
Name (Print/Type)	PAUL P. KIEL	Date	12/17/07		

This collection of information is required by 37 CFR 1.120. The information is required to obtain or retain a benefit by the public which is to be (and by the USPTO is to provide) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This application is estimated to take 30 hours to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending on the individual case. Any comments or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, 1401 L Street, N.W., Washington, D.C. 20531-1460.

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